

ARIZONA DEPARTMENT OF ECONOMIC SECURITY
Division of Developmental Disabilities (DDD)
Employment Supports & Services

MONTHLY PROGRESS REPORT
Employment Support Aide

MONTH/YEAR

Please print

QUALIFIED VENDOR'S NAME

PHONE NUMBER (*Include area code*)QUALIFIED VENDOR'S ADDRESS (*P.O. Box, No., Street, City, State, ZIP*)CONSUMER'S NAME (*Last, First, M.I.*)

EMPLOYMENT PROGRAM SPECIALIST'S NAME

SUPPORT COORDINATOR'S NAME

DDD I.D. NO.

EMPLOYER'S NAME

PHONE NUMBER (*Include area code*)EMPLOYER'S ADDRESS (*P.O. Box, No., Street, City, State, ZIP*)

SUPERVISOR/CONTACT PERSON'S NAME

CONSUMER'S JOB TITLE

HIRE DATE

WEEKLY WORK SCHEDULE

TOTAL HOURS WORKED THIS MONTH

HOURLY RATE

SERVICE SETTING	TYPE OF SUPPORT	MONTHLY HOURS AUTHORIZED	MONTHLY HOURS PROVIDED
<input type="checkbox"/> Center-Based Employment	<input type="checkbox"/> Personal Care Services		
<input type="checkbox"/> Group Supported Employment	<input type="checkbox"/> Behavioral Supports <i>(not available in Center-Based Employment)</i>		
<input type="checkbox"/> Individual Supported Employment	<input type="checkbox"/> Job-related supports <i>(only available in follow-along)</i>		
<input type="checkbox"/> Follow-Along Services			

BEHAVIORAL INTERVENTION

Objective as stated in the Individual Support Plan:

Progress made on listed outcome(s)/objectives. If no progress, identify barriers and list plan of action.

FOLLOW-ALONG SERVICES

Objective as stated in the Individual Support Plan:

Progress made on listed outcome(s)/objectives. If no progress, identify barriers and list plan of action.

EMPLOYMENT SUPPORT AIDE SERVICE LOG

Provide a detailed summary of services rendered, including a description of personal care activities, behavioral supports and job-related supports. Each contact entry must be signed by the Employment Support Aide. Attach additional sheets as necessary.

QUALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S NAME

QUALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S TITLE

QUALIFIED VENDOR ADMINISTRATOR/DESIGNEE'S SIGNATURE

DATE

Routing: Original – Support Coordinator, Copy – District File

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